CARES/ACCESS Updates for November 4th, 2017

DHS Income Maintenance Programs (Medicaid/BadgerCare Plus/FoodShare/Caretaker Supplement)

ACCESS

- Miscellaneous system errors in the background affecting ACCESS performance have been fixed.
- Fixes have been made for some ACCESS users to view information from their ACCESS accounts.

CARES

- Certain Health Care PPRF work items were not updating when a renewal was completed. This has been fixed.
- The IMQA Home page has been added to CWW and the existing Review Summary page has been enhanced.
 See operations memo 17-48.
- Work items were not updating correctly when a member de requested a program after applying. This has been fixed so that when a member de requests, that work item type will be withdrawn.
- When applications are denied for a procedural reason (ie: over income) sometimes workers have to override the
 determination on AGOE. Workers can now enter override codes 713 Denied or terminated from BC+, referring to
 the FFM (when responding to an FFM Referral) or 714 Denied or terminated from BC+ (CARES initiated referral
 to the FFM) to systematically refer the case to the FFM. See CWW Process Help 75.4 for FFM processing
 information.
- The Unearned Income Table Codes (Table TVIN) has been updated to correctly reflect was is counted for each program.
 - Valid Codes: CSCC CSFC CSMC
 - o Invalid Codes: CSCS, CSDP, CSDR, CSMN, CSSU, MN, CSCA, CSFA, CSMA, CSCR, CSFR, CSMR

Correspondence

- The problem with FoodShare interview due dates displaying 12/31/9999 has been permanently fixed. See CARES coordinator's notice dated 9/20/2017.
- Miscellaneous reporting rules on Notices of Decisions have been enhanced. "Your Reporting Rules" information
 on Notice of Decisions for MAP, MAGP Prenatal and MAGE will be updated to inform the member(s) of the
 appropriate reporting rule requirements. A new reporting rule was created so members received the correct
 reporting rules on their notices. Similar changes have been made to MAGP Prenatal, with the Prenatal Income
 limit (306%) listed on the notice.

MAGP only open:



Your Reporting Rules

Based on the benefits you are getting, you must report within 10 days if someone:

- Has a new address
- Has a change in where he or she is staying
- Has a change in pregnancy or has a pregnancy end

If you don't report a change listed above, and you get benefits or coverage that you aren't eligible for, you may have to pay us back. Keep in mind that if your benefits change, your reporting rules may also change.

MAGP and other HC is open with no reporting requirement (ie: MAGE/MAGB):

Based on the benefits you are getting, you must report within 10 days if someone:

- Has a new address
- Has a change in where he or she is staying
- Moves in or out of your home
- Has a change in expected tax filing status
- Has a change in tax dependents
- No longer has a tax-related deduction that you told us about
- Gets married or divorced
- Becomes pregnant or has a pregnancy end
- Has a change in health insurance coverage

If you don't report a change listed above, and you get benefits or coverage that you aren't eligible for, you may have to pay us back. Keep in mind that if your benefits change, your reporting rules may also change.

Combined MAGP and FS case where the 130% reporting rule is met for FS, the reporting rules will display.

Based on the benefits you are getting, you must report within 10 days if someone:

- Has a new address
- Has a change in where he or she is staying
- Moves in or out of your home
- Has a change in expected tax filing status
- Has a change in tax dependents
- No longer has a tax-related deduction that you told us about
- Gets married or divorced
- Becomes pregnant or has a pregnancy end
- Has a change in health insurance coverage

Because your total income exceeds 130% FPL for your FoodShare group size and you remain eligible, you do not have to report any changes until your next review or six month report form.

Working adults between the ages of 18 and 49 with no children in the home must report by the 10th day of the next month if their employment hours go below 80 hours each month.

If you don't report a change listed above, and you get benefits or coverage that you aren't eligible for, you may have to pay us back. Keep in mind that if your benefits change, your reporting rules may also change.

FoodShare

• FS policy states that there is no limit to the amount of times a case can received expedited FS as long as the household provided verifications, completed the requirements and certified under normal processing since the last expedited issuance. Some cases that did not re open for regular FS (after expedited was issued) were issuing expedited incorrectly again. This has been fixed.

A problem where a duplicate FS issuance was issued for month two after expedited FS for months one and two
were confirmed on AA has been fixed.

FSET Tool

- Update the System Help text for the Employment Plan Summary page in the FSET Tool within CWW.
- Updates to exemptions from the Able-Bodied Adults Without Dependents (ABAWD) work requirement, the FoodShare Clock, and FoodShare Employment and Training (FSET) program enrollment. Refer to Ops memo 17-49

Health Care

- CARES enhancements have been made to allow workers to pend for premiums and send a VCL and coupon
 when running with dates. Eligibility issues have been fixed, workers will now be able to run with dates and
 confirm new eligibility in most situations now, and earned income extensions will end correctly when all children
 move out of the home or turn 19. Systems errors running eligibility and on confirmation have also been fixed.
 See Operations Memo 17-50.
- Some Health Care PPRF renewal work items were not updating after the renewal had been processed, this has been fixed.
- The Administrative Renewal logic has been fixed so that cases with Community Waivers based on SSI eligibility only will be administratively renewed. The two exceptions are:
 - 1. If the case is in renewal mode, the case will not be administratively renewed.
 - 2. If the member with QMB or Community Waivers has LOST their SSI eligibility the case will not be administratively renewed.
- CARES was not allowing Self-Employment Depreciation as an expense for Assistance Groups: MAP, MI, MS, NS, MP, NP, QMB, QDW, SLB, MCW). CARES has been fixed to correctly allow the deduction.

System Errors

Miscellaneous system errors have been fixed

- JAVA.LANG.NULLPOINTEREXCEPTION NAVIGATION IN WORK ITEM DETAILS
- Exception Text: 83155-CRE-MAG-BUD ERROR TYPE: DB2 DB2 TABLE NAME: T2293 DB2 FUNCTION: ISRT SQLCODE: -180 DESC:
- Exception Text: PGM: EDBC PARAGRAPH: 84070-FETCH-AG-IN-ELIG ERROR TYPE: DB2 DB2 TABLE NAME: DB2 FUNCTION: SQLCODE: +100 DESC:
- Exception Text: PGM: EDBC PARAGRAPH: 81090-GET-PROCESS-MON-DTL ERROR TYPE: DB2 DB2 TABLE NAME: T0026 AG ELIG DB2 FUNCTION: OPEN SQLCODE: -811 DESC:
- An error in simulation when viewing the utility summary has been fixed.
- Exception occurs when worker navigates from any individual detail page to any summary page and clicks on cancel and then click on any magnifying glass on the summary page.
- When workers entered case or pin comments would get a system error if the characters were over 1,000. It was determined that when using the "return" key, that action was counting more characters. This has been fixed.